# Linkage of Drinking Water Contaminant and Birth Outcome Data in New York State

Steven Forand, MA, MS
Wayne Richter, MS
Sanjaya Kumar, MS

# General Objective

Link Public Water Supply Monitoring Data on Disinfection Byproducts (DBPs) with Birth Outcome Data to Track Patterns and Trends in Time and Space

- Study Population NYS live births
  - 1998-2003

# Why Link Birth Outcomes and Disinfection Byproducts (DBPs)

- Epidemiological studies have shown weak associations between DBPS (such as THMs) and adverse birth outcomes
  - Spontaneous fetal deaths
  - Low birth weight
  - Fetal growth restriction (IUGR, SGA)
  - Certain birth defects
- Short latency of birth outcomes
  - Limited exposure window

## Birth Outcomes

- Low birth weight (<2500g)
- Preterm Birth (< 37 Weeks)</p>
- Term Low Birth Weight (≥37 weeks; <2500g)</p>
- > Small for Gestational Age (lowest 10th percentile for age)
- Birth Defects
  - 22 Birth Defects identified by EPHT Workgroup

## Birth Outcome Data

- Electronic birth certificate records Vital Records
  - 250,000 per year
  - Geocoded to maternal address
    - ~94% Automatically geocoded
- ▶ 1998-2003 (~1.5 million births)
- Congenital Malformation Registry
  - Linked to birth certificate records

#### Birth Outcomes – Strengths / Weaknesses

#### Birth Defects

- Strengths
  - Exposure may be more specific to certain birth defects
  - More limited exposure window
- Weaknesses
  - Small numbers for specific defects
    - Grouping defects not biologically or etiologically sound
  - Regional reporting issues

#### Birth weight/Prematurity/SGA

- Strengths
  - More prevalent (larger numbers)
  - Numerator/Denominator from the same source (fewer reporting issues)
    - Well reported/Easily identified
- Weaknesses
  - Influence of SES, smoking, etc

## Contaminants

- Total Trihalomethanes
  - Chloroform
  - Bromodichorlomethane
  - Dibromochloromethane
  - Bromoform
- Levels depend on source water characteristics such as level of organic matter, temperature as well as residence time

## **Environmental Database**

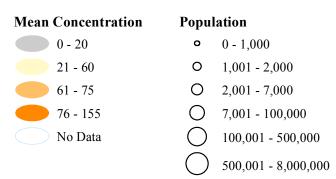
- Safe Drinking Water Information System (SDWIS)/State
  - Monitoring results for total and individual THMs
    - Also contains information on HAAs, heavy metals, VOCs, pesticides, organics, nitrates, nitrites, radionuclides etc.
  - Mandated quarterly DBP monitoring for most systems
  - Some systems monitor more frequently
- Covers 90% of the State's population.
- Contains all sampling data not just violations

# Water District Boundaries

- Developed a GIS layer of water supply system boundaries for systems serving >1,000 persons
  - County health departments water system boundaries
  - GIS/CAD files from service providers
  - On-screen digitizing / scanned paper maps/drawings
  - Tax parcel centroid data
- Cover 95% of the State's population served by public water (>16,000,000 individuals)

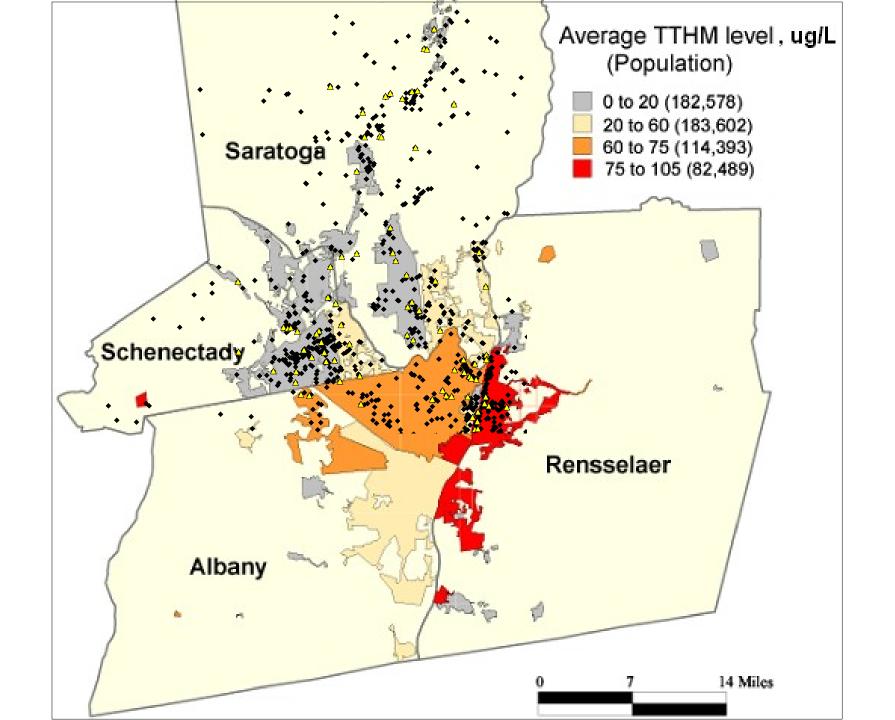


# Total Trihalomethanes and Water Supply System Population



# Data Linkage

- Geocode address at birth
  - Latitude/longitude estimated using automated geocoding system
- Assign each birth record to specific water district
  - Use GIS to make a "point in polygon" match
- Link DBP data from SDWIS based on the water district of birth

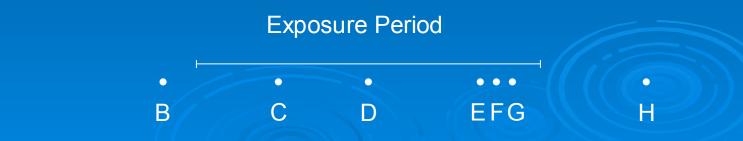


# Exposure Assessment

- Assume water district at birth is a proxy for THM "exposure" throughout pregnancy
- For each pregnancy we attempted to assign 4 estimates for each contaminant
  - Assigned THM measurements for each trimester & full pregnancy
  - For birth defects only the first trimester was evaluated
- THM samples not evenly spaced in time (e.g, two "quarterly" measurements may be taken in the same week March 31 and April 1)

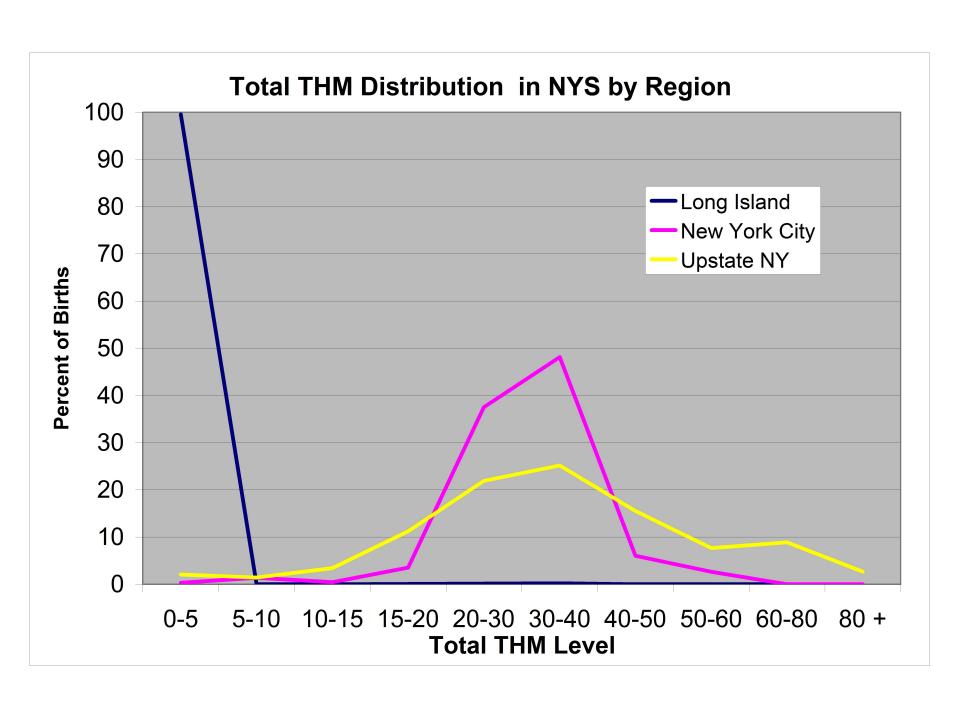
# **Exposure Metric**

- Splines
- Weighted average
  - All samples +/- 30 days of trimester used
  - Multiple samples on the same day were averaged
  - The weight given to a day is based on the proportion of the exposure period for which the day provides information about DBP levels.



# Exposure Assignment Total THMs (2003 Births)

	Births	Births	
Usable		Unusable	
	253,003	_	Total births
	244,469 (97%)	(3%)	Invalid Date
	212,733 (84%)	(13%)	Assign PWS
	170,429 (67%)	(17%)	Full pregnancy
	158,845 (63%)	(21%)	1st trimester
	160,113 (63%)	(21%)	2 <sup>nd</sup> trimester
	160,778 (64%)	(21%)	3 <sup>rd</sup> trimester

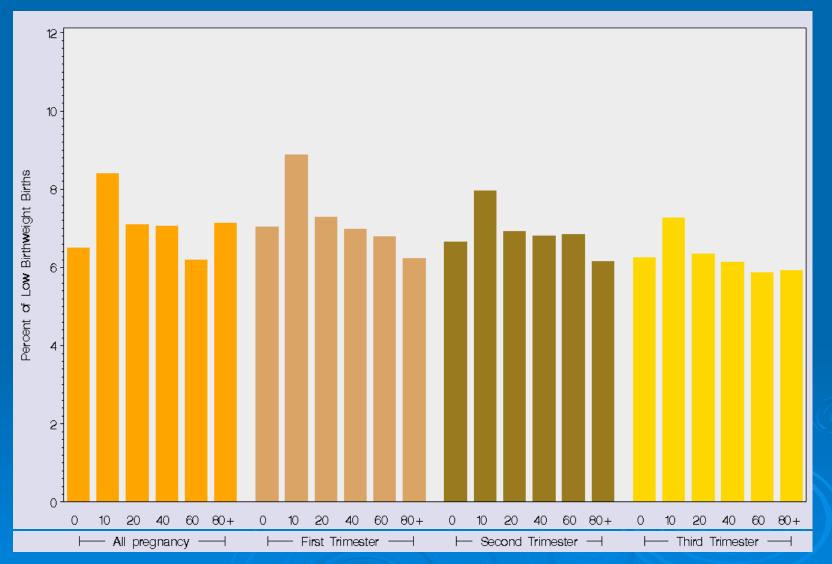


# Analyses

- Exposure stratified prevalence rates of birth outcomes
- Logistic regression analysis
  - Controlled for:
    - mother's age, education, race, ethnicity, employment
    - gender, payor, and adequacy of prenatal care
- Analyzed birth weight as a continuous variable
  - Generalized Linear Model

#### Percent of Low Birthweight Births by Trimester

Upstate New York (including Long Island) 1998-2003

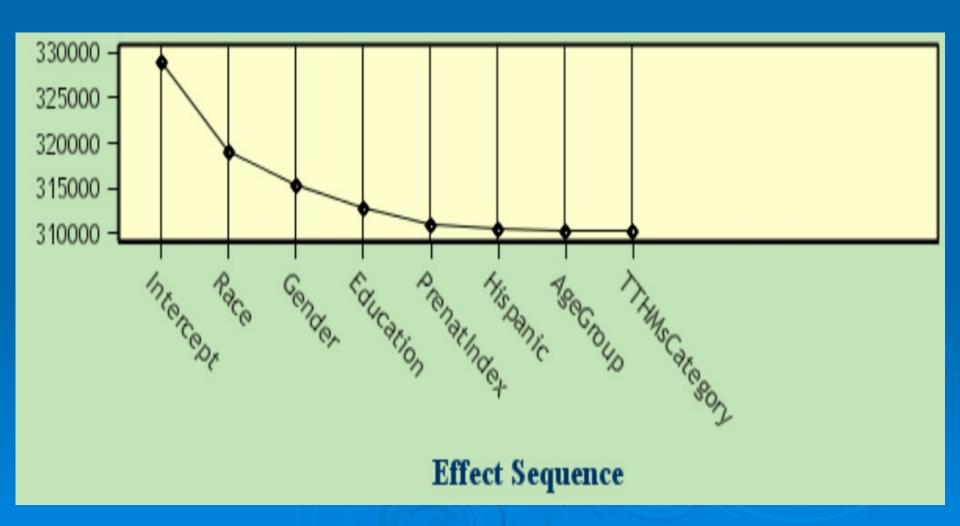


**Total Trihalomethane Level** 

# Low Birth Weight and TTHMs

	Long Island		New	York City	Upstate	NY
TTHM (ug/L)	OR	95%CI	OR	95% CI	OR	95% CI
0-10 (reference)	-	-	-	-	-	-
10-15	0.0	(0.0-1000)				
15-20	0.0	(0.0-1000)			1.1	(0.9-1.3)
20-25	0.0	(0.0-1000)	0.9	(0.8-0.9)	1.0	(0.9-1.2)
25-30	1.3	(0.2-10.2)	0.9	(0.8-0.9)	1.1	(0.9-1.3)
30-45	2.9	(0.9-10.1)	0.7	(0.7-0.8)	1.0	(0.8-1.1)
35-40	0.0	(0.0-1000)	1.0	(0.9-1.1)	1.0	(0.9-1.2)
40-60	0.0	(0.0-1000)	1.0	(0.9-1.1)	1.1	(0.9-1.2)
60-80	-	-			0.9	(0.8-1.0)
80 +	- /	//·	-		1.0	(0.9-1.3)

# Validation Average Standard Error



## Conclusions

- Odds Ratios close to 1 for most outcomes examined
  - LBW, Preterm, Term LBW, SGA
  - Individual THMs
- Little evidence of a dose response in any outcome-exposure combinations
- Surveillance system can be easily modified to examine other contaminants reported to SDWIS

# Future Areas

- Incorporate HAA data into system
- Incorporate additional contaminants as recommended by the CWG
- Continue to analyze THMs
- Subdivide large heterogeneous water systems with multiple sampling points
- Interpolation in systems with little variability

## The End

Steve Forand spf02@health.state.ny.us

#### **Thanks**

- Sanjaya Kumar Statistical Analysis sxk10@health.state.ny.us
- ➤ Wayne Richter Water Supply wxr04@health.state.ny.us